

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	C-V M. H jeb	50503 625 1030	10-25-01 05/12/01 06-21-01 7-24-01

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)..... Canceled
 Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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